

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

## UNITED STATES DISTRICT COURT

for the  
Middle District of Pennsylvania

3rd Division

3:19-CV-1499

Case No.

TRT-NER-2019-01354

(to be filled in by the Clerk's Office)

Simeon Joel Briggs

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

United States

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Jury Trial: (check one)



Yes



No

FILED  
SCRANTON

AUG 28 2018

PER

DEPUTY CLERK

## COMPLAINT FOR A CIVIL CASE

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

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## Defendant No. 1

Name  
 Job or Title (if known)  
 Street Address  
 City and County  
 State and Zip Code  
 Telephone Number  
 E-mail Address (if known)

Jennifer Enigk  
 U.S. ~~Health~~ Public Health Service Official  
 2400 Robert F. Miller Dr  
 Lewisburg, PA 17837  
 Lewisburg, PA 17837  
 \_\_\_\_\_  
 \_\_\_\_\_

## Defendant No. 2

Name  
 Job or Title (if known)  
 Street Address  
 City and County  
 State and Zip Code  
 Telephone Number  
 E-mail Address (if known)

~~Andrea Brockman~~ Andrea Brockman  
~~Coordinator/psychologist~~ Coordinator/psychologist  
~~2400 Robert F. Miller Dr~~ 2400 Robert F. Miller Dr  
~~Lewisburg, PA~~ Lewisburg  
~~Pennsylvania 17837~~ Pennsylvania 17837  
 \_\_\_\_\_  
 \_\_\_\_\_

## Defendant No. 3

Name  
 Job or Title (if known)  
 Street Address  
 City and County  
 State and Zip Code  
 Telephone Number  
 E-mail Address (if known)

~~Rachel Eigenbrode~~ Rachel Eigenbrode  
~~Psychologist~~ Psychologist  
~~2400 Robert F. Miller Dr~~ 2400 Robert F. Miller Dr  
~~Lewisburg, PA~~ Lewisburg  
~~Pennsylvania 17837~~ Pennsylvania 17837  
 \_\_\_\_\_  
 \_\_\_\_\_

## Defendant No. 4

Name  
 Job or Title (if known)  
 Street Address  
 City and County  
 State and Zip Code  
 Telephone Number  
 E-mail Address (if known)

\_\_\_\_\_  
 \_\_\_\_\_  
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**II. Basis for Jurisdiction**

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? (check all that apply)



Federal question



Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

**A. If the Basis for Jurisdiction Is a Federal Question**

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

**B. If the Basis for Jurisdiction Is Diversity of Citizenship****1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, (name) Simeon Joel Briggs, is a citizen of the  
State of (name) Rhode Island.

**b. If the plaintiff is a corporation**

The plaintiff, (name) \_\_\_\_\_, is incorporated  
under the laws of the State of (name) ~~Rhode Island~~,  
and has its principal place of business in the State of (name) \_\_\_\_\_.

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

**2. The Defendant(s)****a. If the defendant is an individual**

The defendant, (name) \_\_\_\_\_, is a citizen of  
the State of (name) \_\_\_\_\_. Or is a citizen of  
(foreign nation) \_\_\_\_\_.

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## b. If the defendant is a corporation

The defendant, (name) Jennifer Enigk, is incorporated under the laws of the State of (name) Pennsylvania/United States, and has its principal place of business in the State of (name) U.S. Public Health Service. Or is incorporated under the laws of (foreign nation) \_\_\_\_\_, and has its principal place of business in (name) \_\_\_\_\_.

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

## 3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because (explain): Defendant Jennifer Enigk is a member of the U.S. Public Health Service

## III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

U.S. Public Health Service official Jennifer Enigk and Psychology Staff Eigenbrode, Brockman refused to treat a mental health disorder, deny me access to the psychiatrist, falsifying other inmates reports in my file, and Violated my 8th Amendment Right.

See Attachments

## IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

I'm asking to be Compensated \$500,000 for punitive damages, Compensatory damages, mental & emotional distress, as well as my disciplinary record and sanctions expunged from my record. And whatever else the Courts feel is necessary.

**V. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 8-25-19

Signature of Plaintiff

Printed Name of Plaintiff

Simone Joel Briggs  
Simone Joel Briggs

**B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Street Address

State and Zip Code

Telephone Number

E-mail Address

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On 7-26-18 I file a Administrative Remedy (BPR) on Chief Psychology Dr. J. Enigk for breaching my confidentiality by sharing private information to staff, violating my 8th Amendment by putting my safety and wellbeing at risk by telling staff on first and second shift I'm a creep. All this was done to retaliate on me, cuz I wrote a request to not speak to her and to speak to another member of the psychology department.

On 7-17-18 Dr. J. Enigk sent me a letter by mail telling me that I've been advised that I don't meet criteria for a diagnosis of any major mood disorder and I don't need medication. When clearly she has written false information on me, cuz I'm a state inmate from Rhode Island, and the state never sent none of my mental health records to the feds, I don't even have a P.S.I. The camera's will show that on 7-17-18 or any time before that she has never spoken to me at all. She got removed from G block, and been replaced by Dr. R. Eigenbrode, Dr. A. Brockman, and treatment specialist Whittaker.

On 8-15-18, Dr. Brockman, and Dr. Eigenbrode made rounds, I gave Dr. Brockman some paperwork from Rhode Island state jail, and from a mental hospital that in fact shows what I'm diagnosed with, and the medication I was on. She's never done anything with it, not even contact Rhode Island to request my records. I had to tell Whittaker to make her

give them back. I had 4 situations dealing with a mental illness where I've been on suicide watch for, and I just got off "CMS" on 9-21-18 from 9-11-18.

The psychology department fails to do there duties acording ~~to~~ to B.O.P policy. They're falsafieing documentations to cover up there lies and wrong doings. I have paperwork to prove, and show.

~~Also, I took an evaluation on 1-15-19 by Enigk and~~  
~~Also, I took an evaluation on 1-15-19 by Enigk and~~  
Also, I took an evaluation on 1-15-19 by Enigk and after that test, I was informed by medical staff that I had to wait for the results, due to somebody elses paperwork being put in my file for the 3rd time. I ask for a second opinion by a psychiatrist and I got denied, but a inmate request to have his medication changed and it got changed without no evaluation or any testing.

All three defendants violated my 8th Amendment rights by denying me mental health treatment and access to see the psychiatrist.

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C If the defendant is a Corporation

The defendant Andrea Brockman, is a Citizen of the State of Pennsylvania and/or is incorporated under the laws of Pennsylvania/United States.

The defendant Rachel Eigenbrode, is a Citizen of the State of Pennsylvania and/or is incorporated under the laws of Pennsylvania/United States.



Inmate Name: Simon, Barry  
Register Number: 960-555  
United States Penitentiary  
P.O. Box 1000  
Lewisburg, PA 17837

16 AUG 2019

RECEIVED  
SCRANTON

AUG 28 2019

PER [Signature]  
DEPUTY CLERK

(Legal Mail)

18501-500199

(Legal Mail)

HARRISBURG PA 171

PSA 25 AUG 2019 FMS 1

To: Office of The Clerk  
United States District Court  
Middle District of Pennsylvania  
235 North Washington  
Ave.  
P.O. Box 1148  
Scranton, PA 18501

